Under the Paperwork Reduction Act of 1995, no person	U.S. Pa ons are required to respond to a	tent and Trademark Of collection of information	ifice; U.S. DEPARTMENT OF COMMERCE unless it displays a valid OMB control number.
PETITION FOR EXTENSION OF			Docket Number (Optional) 003-006-C1
	In re Application of	PLESS et al.	
10116	Application Number	09/698,357	Filed October 27, 2000
MAY 0 3 2004 &	For APPARATUS AND METHOD FOR ABLATING TISSUE		
	Group Art Unit Examiner 3739 Michael F. Peffley		
This ADF We quest under the provision	ns of 37 CFR 1.136(a	a) to extend the p	period for filing a
reply in the above identified applica	ation.		
The requested extension and appro (check time period desired):	opriate non-small-enti	ty fee are as follo	ows
☐ One month (37 CFR	1.17(a)(1))		\$
☐ Two months (37 CF	Two months (37 CFR 1.17(a)(2))		\$
Three months (37 C	Three months (37 CFR 1.17(a)(3))		
☐ Four months (37 Cl	Four months (37 CFR 1.17(a)(4))		
☐ Five months (37 CF	R 1.17(a)(5))		\$
□ A check in the amount of the Payment by credit card. For the Commissioner has alrest application to Deposit According The Commissioner is hereful or credit any overpayment. I have enclosed a duplicate I am the □ applicant/inventor. □ assignee of record of the Statement under 37 Cordinary or agent of recording attorney or agent under Registration number if according to the Registration number if according to the Payment Payment I according to the	orm PTO-2038 is attace and been authorized bunt No. 50-1247. by authorized to charge, to Deposit Account I e copy of this sheet. he entire interest. See CFR 3.73(b) is enclose cord.	to charge fees ir ge any fees whicl Number 50-1247 e 37 CFR 3.71 ed. (Form PTO/S	h may be required, .
WARNING: Information on this to be included on this form. Provi			
Date	•	7/	Signature
			Jens E. Hoekendijk
			Reg. No.: 37,149
		Т	Typed or printed name

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Commissioner for Patents, P.O. Box 1450, Arlington, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Arlington, VA 22313-1450.

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

forms if more than one signature is required, see below*.